In re		According to the calculations required by this statement:
	Debtor(s)	☐ The applicable commitment period is 3 years.
		☐ The applicable commitment period is 5 years.
Case Number:		☐ Disposable income is determined under § 1325(b)(3).
cuse rvamser	(If known)	☐ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Part I. REPO	RT OF INCOME			
1	Marital/filing status. Check the box that applies and complete the balance of this part of this state. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income")					
All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.					Column A Debtor's Income	Column B Spouse's Income
2	Gross	wages, salary, tips, bonuses, overtime, commis	sions.		\$	\$
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.					
	a.	Gross receipts	\$			
	b.	Ordinary and necessary business expenses	\$			
	c.	Business income	Subtract Line b from Line a		\$	\$
Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV.						
4	a.	Gross receipts	\$]		
	b.	Ordinary and necessary operating expenses	\$			
	c.	Rent and other real property income	Subtract Line b from Line a		\$	\$
5	Interest, dividends, and royalties.				\$	\$
6	Pension and retirement income.				\$	\$
Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.					\$	\$

B 22C (O	ficial Form 22C) (Chapter I	3) (12/10)					2
8	However, if you conte was a benefit under th	pensation. Enter the are and that unemploymen e Social Security Act, astead state the amount	t compensation receiv do not list the amount	ed by you or	your spouse		
	Unemployment complete a benefit under the	pensation claimed to e Social Security Act	Debtor \$	Spouse \$ _		\$	\$
9	sources on a separate maintenance paymer separate maintenance payments received as international or domes	page. Total and enter on the paid by your spoure. Do not include any a victim of a war crimustic terrorism.	on Line 9. Do not incl ise, but include all oth benefits received und	ude alimony ner paymen er the Social	or separate ts of alimony or Security Act or		
	a. b.			\$			Φ.
10		2 thru 9 in Column A, B. Enter the total(s).	and, if Column B is co	I ·	d Lines 2	\$	\$
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column				\$	*	
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD						
12	Enter the amount from Line 11.				\$		
13	Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. S				ne of your aid on a ow, the basis of persons pose. If		
	c.			\$			
	Total and enter on Lir	ne 13.					\$
14	Subtract Line 13 from Line 12 and enter the result.					\$	
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.				the number 12	\$	
16	Applicable median family income. Enter the median family income for applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence:			\$			
							Ψ
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed. The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitments and years" at the top of page 1 of this statement and continue with this statement. The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable commitments amount on Line 16. Check the box for "The applicable check the line 16. Check the box for "The applicable check the line 16. Check the box for "The applicable check the line 16. Check the line 16. Che					_	
	<u> </u>	top of page 1 of this st CATION OF § 132				ARI E INCO	MF
18	Enter the amount from		23(D)(3) FUR DE	T TAININITIN	ING DISTUS!	ADLE INCO	\$
10	Enter the amount Ir	ли Line 11.					Ψ

\$

the number of any additional dependents whom you support.

25B	is avai consist the nut Month	Standards: housing and utilities; mortgage/rent expense. Enterousing and Utilities Standards; mortgage/rent expense for your collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at https://www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at https://www.usdoj.gov/ust/ or from the clerk of the bankruptcy collable at https://www.usdoj.go	unty and family size (this informational) (the applicable family size a your federal income tax return, pluine b the total of the Average	on 18	
	a.	IRS Housing and Utilities Standards; mortgage/rent expense	\$		
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$		
	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$	
26	and 25 Utilitie	Standards: housing and utilities; adjustment. If you contend the B does not accurately compute the allowance to which you are eness Standards, enter any additional amount to which you contend you contention in the space below:	titled under the IRS Housing and	or \$	
27A	check are inc If you Transp Local Statist	Standards: transportation; vehicle operation/public transport se allowance in this category regardless of whether you pay the excless of whether you use public transportation. the number of vehicles for which you pay the operating expenses cluded as a contribution to your household expenses in Line 7. checked 0, enter on Line 27A the "Public Transportation" amount cortation. If you checked 1 or 2 or more, enter on Line 27A the "Ostandards: Transportation for the applicable number of vehicles in ical Area or Census Region. (These amounts are available at www.nkruptcy.court.)	or for which the operating expense 0 1 2 or more. from IRS Local Standards: Operating Costs" amount from IRS the applicable Metropolitan	s	
27B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
28	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) I			n	

B 22C (O	fficial Fo	orm 22C) (Chapter 13) (12/10)		. 5		
		Standards: transportation ownership/lease expense; Vehicle 2. ed the "2 or more" Box in Line 28.	Complete this Line only if you			
	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation					
	(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the					
• •	Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.					
29						
	a.	IRS Transportation Standards, Ownership Costs	\$			
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$			
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$		
30	federa	Necessary Expenses: taxes. Enter the total average monthly experior, state, and local taxes, other than real estate and sales taxes, such a social-security taxes, and Medicare taxes. Do not include real estate	as income taxes, self-employment	\$		
	Other	Necessary Expenses: involuntary deductions for employment.	Enter the total average monthly			
31		tions that are required for your employment, such as mandatory reti				
	and ur	niform costs. Do not include discretionary amounts, such as volu	ntary 401(k) contributions.	\$		
	Other	Necessary Expenses: life insurance. Enter total average monthly	premiums that you actually pay for			
32						
	life or for any other form of insurance.			\$		
		Necessary Expenses: court-ordered payments. Enter the total n				
33	to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49.			\$		
	Other Necessary Expenses: education for employment or for a physically or mentally challenged child.			Ψ		
2.4	Enter the total average monthly amount that you actually expand for advection that is a condition of					
34		byment and for education that is required for a physically or mentall				
	whom no public education providing similar services is available.					
	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on					
35	8,,			\$		
	payments.					
		• Necessary Expenses: health care. Enter the total average month alth care that is required for the health and welfare of yourself or your				
36		urance or paid by a health savings account, and that is in excess of				
		clude payments for health insurance or health savings accounts		\$		
		Necessary Expenses: telecommunication services. Enter the total				
37		ly pay for telecommunication services other than your basic home t				
		as pagers, call waiting, caller id, special long distance, or internet se nealth and welfare or that of your dependents. Do not include any a		\$		
38		Expenses Allowed under IRS Standards. Enter the total of Lines		\$		
		Subpart B: Additional Living Expens	se Deductions			

Subpart B: Additional Living Expense Deductions
Note: Do not include any expenses that you have listed in Lines 24-37

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c.

\$

Total: Add

Lines a, b, and c

□ yes □ no

\$

48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.				on		
		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount			
	a.		1 , 5	\$			
	b.			\$			
	c.			\$			
				Total: Add Lines a, b, and c	\$		
49	as pri	ority tax, child support	iority claims. Enter the total amount, divand alimony claims, for which you were lent obligations, such as those set out in I	iable at the time of your bankruptcy	h \$		
		oter 13 administrative ting administrative expe	expenses. Multiply the amount in Line a base.	by the amount in Line b, and enter the	;		
	a.	Projected average mor	nthly chapter 13 plan payment.	\$			
50	b.	schedules issued by th	your district as determined under e Executive Office for United States nation is available at www.usdoj.gov/ust/ e bankruptcy court.)	x			
	c.	Average monthly adm	inistrative expense of chapter 13 case	Total: Multiply Lines a and b	\$		
51	Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.						
Subpart D: Total Deductions from Income							
52	Total	l of all deductions fron	n income. Enter the total of Lines 38, 46,	and 51.	\$		
Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)							
		Part V. DETERN	MINATION OF DISPOSABLE I	NCOME UNDER § 1325(b)(2	2)		
53	Total		me. Enter the amount from Line 20.	NCOME UNDER § 1325(b)(2	\$		
53 54	Supp disab	current monthly inco ort income. Enter the n ility payments for a dep		nents, foster care payments, or eceived in accordance with applicable	\$		
	Supp disab nonba Qual wage	l current monthly inco port income. Enter the national continuous series of a department of a department of the extinuous series of the contributions for quantum of the contributions for quantum of the contributions for quantum of the current of the contributions for quantum of the current	me. Enter the amount from Line 20. nonthly average of any child support paynendent child, reported in Part I, that you re	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required	\$ e \$		
54	Supp disab nonba Qual wage repay	l current monthly inco cort income. Enter the national street incomes and the part of the ex- ified retirement deducts as contributions for quarter of loans from reterior.	me. Enter the amount from Line 20. nonthly average of any child support paymendent child, reported in Part I, that you retent reasonably necessary to be expended tions. Enter the monthly total of (a) all an addition retirement plans, as specified in §	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required (b).	\$ e \$ om		
54	Supp disab nonba Qual wage repay Total Dedu which a-c be Line provi	l current monthly inco cort income. Enter the mility payments for a dep ankruptcy law, to the ex ified retirement deducts as contributions for quarents of loans from retained and deductions allowed the contribution of the cont	me. Enter the amount from Line 20. nonthly average of any child support paymendent child, reported in Part I, that you retent reasonably necessary to be expended tions. Enter the monthly total of (a) all an allified retirement plans, as specified in § 362(b)(19)	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required on the form Line 52. es that justify additional expenses for neces and the resulting expenses in line of these expenses and you must	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
54	Supp disab nonba Qual wage repay Total Dedu which a-c be Line provi	l current monthly inco fort income. Enter the mility payments for a depankruptcy law, to the exified retirement deducts as contributions for quements of loans from retained and deductions allowed the company of the c	me. Enter the amount from Line 20. nonthly average of any child support paymendent child, reported in Part I, that you retent reasonably necessary to be expended tions. Enter the monthly total of (a) all an addified retirement plans, as specified in § irement plans, as specified in § 362(b)(19) wed under § 707(b)(2). Enter the amount mstances. If there are special circumstance alternative, describe the special circumstance ditional entries on a separate page. Total your case trustee with documentation of the special circumstances that many part of the special circumstances in the special circumstances that many part of the specia	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required on the form Line 52. es that justify additional expenses for neces and the resulting expenses in line of these expenses and you must	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
54 55 56	Supp disab nonba Qual wage repay Total Dedu which a-c be Line provi	l current monthly inco ort income. Enter the mility payments for a dep ankruptcy law, to the ex ified retirement deducts as contributions for quarements of loans from retained and the deduction of the entering of the enter	me. Enter the amount from Line 20. nonthly average of any child support paymendent child, reported in Part I, that you retent reasonably necessary to be expended tions. Enter the monthly total of (a) all an addified retirement plans, as specified in § irement plans, as specified in § 362(b)(19) wed under § 707(b)(2). Enter the amount mstances. If there are special circumstance alternative, describe the special circumstance ditional entries on a separate page. Total your case trustee with documentation of the special circumstances that many part of the special circumstances in the special circumstances that many part of the specia	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required on the from Line 52. The stat justify additional expenses for the expenses and the resulting expenses in line of these expenses and you must alke such expenses necessary and	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
54 55 56	Supp disab nonbase Qual wage repays Total Dedu which a-c be Line provireaso	l current monthly inco ort income. Enter the mility payments for a dep ankruptcy law, to the ex ified retirement deducts as contributions for quarements of loans from retained and the deduction of the entering of the enter	me. Enter the amount from Line 20. nonthly average of any child support paymendent child, reported in Part I, that you retent reasonably necessary to be expended tions. Enter the monthly total of (a) all an addified retirement plans, as specified in § irement plans, as specified in § 362(b)(19) wed under § 707(b)(2). Enter the amount mstances. If there are special circumstance alternative, describe the special circumstance ditional entries on a separate page. Total your case trustee with documentation of the special circumstances that many part of the special circumstances in the special circumstances that many part of the specia	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required by the form Line 52. es that justify additional expenses form and the resulting expenses in line of these expenses and you must take such expenses necessary and the expenses of the expenses and you must take such expenses and you must take such expenses necessary and the expenses and you must take such expenses necessary and the expenses necessary necessa	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
54 55 56	Supp disab nonba Qual wage repay Total Dedu which a-c be Line provireaso	l current monthly inco ort income. Enter the mility payments for a dep ankruptcy law, to the ex ified retirement deducts as contributions for quarements of loans from retained and the deduction of the entering of the enter	me. Enter the amount from Line 20. nonthly average of any child support paymendent child, reported in Part I, that you retent reasonably necessary to be expended tions. Enter the monthly total of (a) all an addified retirement plans, as specified in § irement plans, as specified in § 362(b)(19) wed under § 707(b)(2). Enter the amount mstances. If there are special circumstance alternative, describe the special circumstance ditional entries on a separate page. Total your case trustee with documentation of the special circumstances that many part of the special circumstances in the special circumstances that many part of the specia	nents, foster care payments, or eceived in accordance with applicable for such child. nounts withheld by your employer from 541(b)(7) and (b) all required by the from Line 52. es that justify additional expenses for expenses and the resulting expenses in line of these expenses and you must ake such expenses necessary and the expense th	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		

B 22C (O	fficial Fo	rm 22C) (Chapter 13) (12/10)		8			
58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.						
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.						
		Part VI: ADDITIONAL EXPENSE CLA	AIMS				
60	and we	Expenses. List and describe any monthly expenses, not otherwise stated in elfare of you and your family and that you contend should be an additional e under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separe monthly expense for each item. Total the expenses. Expense Description Total: Add Lines a, b, and c	deduction from your current r	nonthly			
Part VII: VERIFICATION							
61		are under penalty of perjury that the information provided in this statement sebtors must sign.)	is true and correct. (If this is a	i joint case,			
61		Date: Signature:	(Debtor)				
	1						

Signature: _______(Joint Debtor, if any)